BEFORE THE DIVISION OF MEDICAL QUALITY MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:)	
LAURENCE D. COLMAN, M.D. Certificate No. G-57582)	No. 05-92-22784
Respondent.) _) _)	

DECISION

The attached Stipulation for Surrender of License is hereby adopted by the Division of Medical Quality as its Decision in the above-entitled matter.

This Decision shall become effective on <u>June 29, 1998</u>
IT IS SO ORDERED <u>June 22, 1998</u>.

By:

IRA LUBELL, M.D.

Chairperson, Panel A

Division of Medical Quality

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ent by: JUSTICE DEPT
                                    2138976326;
                                                  10/28/97 12:00; Jetfax #745;Page 3/9
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DANIEL E. LUNGREN Attorney General of the State of California ELISA B. WOLFE 2 Deputy Attorney General, State Bar No. 120357 California Department of Justice 300 South Spring Street, Suite 5212 Los Angeles, California 90013-1204 4 Telephone: (213) \$97~2555 5 Attorneys for Complainant б

BEFORE THE DIVISION OF MEDICAL QUALITY MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

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In the Matter of the Accusation Against:

LAURENCE D. COLMAN, M.D. 850 Steeles Avenue West #1006 Thornhill, Ontario, Canada L4J8E7

> Physician's and Surgeon's Certificate No. G-57582.

> > Respondent.

MBC Case No. 05-92-22784

OAH No. L-1997050442

STIPULATION FOR SURRENDER OF LICENSE

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IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-entitled proceedings, that the following matters are true:

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Ron Joseph ("complainant") is the Executive 1. Director of the Medical Board of California, Department of Consumer Affairs ("Board") and is represented by Daniel E. Lungren, Attorney General of the State of California by Elisa B.

Wolfe, Deputy Attorney General. 27

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- 2. Laurence D. Colman, M.D. ("respondent") is represented in this matter by C. Snyder Patin, Esq., whose office is located at 222 S. Harbor Boulevard, Suite 600, Anaheim, California 92805. Respondent has counseled with his attorney concerning the effect of this stipulation which respondent has carefully read and fully understands.
- 3. Respondent has received and read the Accusation which is presently on file and pending in Case No. 05-92-22784 before the Division of Medical Quality ("Division") of the Medical Board of California. A copy of said Accusation is attached hereto and incorporated herein by this reference.
- 4. Respondent understands the nature of the charges alleged in the Accusation and that, if proven at hearing, such charges and allegations would constitute cause for imposing discipline upon respondent's license issued by the Board.
- 5. Respondent and his counsel are aware of each of respondent's rights, including the right to a hearing on the charges and allegations, the right to confront and cross-examine witnesses who would testify against respondent, the right to testify and present evidence on his own behalf, as well as to the issuance of subpoenas to compel the attendance of witnesses and the production of documents, the right to contest the charges and allegations, and other rights accorded respondent pursuant to the California Administrative Procedure Act (Gov. Code §§ 11300 et seq.) and other applicable laws, including the right to seek reconsideration, superior court review, and appellate review.

ent by: JUSTICE DEPT 2138976326;

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In order to avoid the expense and uncertainty of a б. hearing, respondent freely and voluntarily waives each and every one of these rights set forth above. For the purpose of resolving Board Case No. 05-92-22784 without further proceedings: (1) respondent agrees that, at a hearing, complainant could present a prima facie case establishing the charges in the Accusation on file in said case, and (2) respondent hereby gives up his right to contest the charges and causes for discipline set forth in the Accusation on file in said case. Respondent further agrees to surrender his Physician's and Surgeon's Certificate for the Division's formal acceptance. Upon (1) the Division's formal acceptance of respondent's surrender of his physician's and surgeon's certificate, and (2) respondent's compliance with the requirements set forth in paragraph 8 infra, the Accusation on file in this case shall be withdrawn.

Respondent understands that by signing this stipulation, he is enabling the Division of Medical Quality to issue its order accepting the surrender of his Physician's and Surgeon's Certificate without further process. He understands and agrees that Board staff and counsel for complainant may communicate directly with the Division regarding this stipulation, without notice to or participation by respondent or his counsel. In the event that this stipulation is rejected for any reason by the Division, it will be of no force or effect for either party. The Division will not be disqualified from further action in this matter by virtue of its consideration of this stipulation.

Bent by: JUSTICE DEPT

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Upon acceptance of the stipulation by the 8. Division, respondent understands that he will no longer be permitted to practice as a physician and surgeon in California, unless and until his physician's and surgeon's certificate is reinstated. Respondent agrees to surrender and cause to be delivered to the Division both his license and wallet certificate before the effective date of the decision.

- Respondent fully understands and agrees that in the event he files an application for relicensure or reinstatement in the State of California, then (1) the Division shall treat it as a petition for reinstatement, (2) respondent must comply with all the laws, regulations and procedures for reinstatement of a revoked license in effect at the time the petition is filed, (3) the Accusation previously filed in Board Case No. 05-92-22784 shall be refiled without respondent's claim of laches accruing from April 15, 1997, to the date of refiling, and (4) all of the charges and allegations contained in the Accusation filed in Board Case No. 05-92-22784 will be deemed to correct and admitted by respondent when the Division GBU) 12-31-97 determines whether to grant or deny the petition.
- Respondent also fully understands and agrees that in the event he files an application for relicensure or reinstatement in the State of California, then he shall be required to reimburse the Division for the cost of investigating and prosecuting Medical Board Case No. 05-92-22784 (DOJ docket no. LA96AD2172). Payment in full must be tendered as a condition precedent to the Division's acceptance and consideration of such

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an application. The amount of said reimbursement is $11,606.79,
    which is broken down as follows:
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    --Medical Board investigation fees
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       fiscal year 92-93: 4.00 hours x $ 73.00/hour = $ 292.00
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       fiscal year 93-94: 14.50 hours x $ 91.71/hour =
       fiscal year 94-95: 15.00 hours x $104.01/hour =
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                                                         1560.15
       fiscal year 95-96: 14.75 hours x $110.93/hour =
                                                         1636,22
       fiscal year 96-97: 19.00 hours x $110.93/hour =
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                                                         2107.67
                                                        $6918.29
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    --Expert review fees (Marvin Schwartz, M.D.) $2400.00
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    -- Dept of Justice legal fees (docket no. LA96AD2172):
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       Deputy Attorney General time
       fiscal year 96-97: 17.00 hours x $ 98.00/hour - $1666.00
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       fiscal year 97-98: 5.00 hours x $ 98.00/hour =
                                                         490.00
                                                        $2156.00
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       Paralegal time
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       fiscal year 97-98: 2.50 hours x $ 53.00/hour = $ 132.50
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              GRAND TOTAL:
                                                             $11606.79
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                   All admissions and recitals contained in this
              11.
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    stipulation are made solely for the purpose of settlement in this
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    proceeding and for any other proceedings in which the Division of
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    Medical Quality, Medical Board of California or other domestic
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    professional licensing agency is involved, and shall not be
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    admissible in any other criminal or civil proceedings.
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                               ACCEPTANCE
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              I, Laurence D. Colman, M.D., have carefully read the
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    above stipulation and enter into it freely and voluntarily with
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the advice of counsel, and with full knowledge of its force and

effect, do hereby surrender my Physician's and Surgeon's Certif-

icate, No. G-57582, to the Division of Medical Quality, Medical

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Board of California, for its formal acceptance. By signing this stipulation to surrender my physician's and surgeon's certificate, I recognize that upon its formal acceptance by the Division, I will lose all rights and privileges to practice as a physician and surgeon in the State of California. I will cause to be delivered to the Division both my wall certificate and wallet card, as well as my triplicate prescription books (used and unused), before the effective date of the decision. DATED: LAURENCE D. COLMAN, Respondent I concur in the stipulation. LAW OFFICES OF O'FLAHERTY & BELGUM Attorney for Respondent DATED: 12-31-97 DANIEL E. LUNGREN, Attorney General of the State of California ELISA B. WOLFE Deputy Attorney Géneral Attorneys for Complainant

1	DANIEL E. LUNGREN Attorney General of the State of California			
2	ELISA B. WOLFE			
3	Deputy Attorney General California Department of Justice 300 South Spring Street, Suite 5212 STATE OF CALIFORNIA			
4	Los Angeles, California 90013-1233 MEDICAL BOARD OF CALIFORNIA			
5	Attorneys for Complainant SACRAMENTO HOLD IS 19 67 BY AGHIE SALVAGE ANALYST			
6	Accorneys for compramiant			
7				
8	BEFORE THE DIVISION OF MEDICAL QUALITY			
9	MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA			
11	In the Matter of the Accusation) MBC Case No. 05-92-22784 Against:			
12	LAURENCE D. COLMAN, M.D.			
13	2021 Santa Monica Boulevard) Suite 212-E) ACCUSATION			
14	Santa Monica, California 90404) Physician's and Surgeon's)			
15	Certificate No. G-57582,			
16	Respondent.)			
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20	RON JOSEPH ("Complainant"), for causes for discipline,			
21	alleges:			
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23	PARTIES			
24	1. Complainant makes and files this accusation solely			
25	in his official capacity as the Executive Director of the Medical			
26	Board of California ("Board").			
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2. On or about July 1, 1986, the Board issued Physician's and Surgeon's Certificate No. G-57582 to Laurence D. Colman, M.D. ("respondent"). At all times relevant to the charges brought herein, this license was in full force and effect. Said license expired on or about August 31, 1995 and has not been renewed.

JURISDICTION AND LEGAL AUTHORITY

- 3. This accusation is brought before the Division of Medical Quality ("Division") of the Medical Board of California, Department of Consumer Affairs, pursuant to the authority set forth in the ensuing sections of the California Business and Professions Code ("B&P").
- 4. B&P § 2220 requires that the Division of Medical Quality of the Medical Board of California shall enforce and administer the provisions of Article $12^{1/}$ of the Medical Practice Act $^{2/}$ as to all holders of physician's and surgeon's certificates.
- 5. B&P § 2227 provides that the Division may revoke, suspend for a period not to exceed one year, or place on probation, the license of any licensee who has been found guilty under the Medical Practice Act.
 - 6. B&P § 2234 provides in relevant part that:

"The Division of Medical Quality shall take action against any licensee who is charged with unprofessional con-

^{1.} Business and Professions Code sections 2220-2319.

^{2.} Business and Professions Code section 2000 et seq.

duct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

- "(a) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this chapter.
 - "(b) Gross negligence.
 - "(c) Repeated negligent acts.
 - "(d) Incompetence...."

I. IN RE: "K.G." - MARCH 1989

- 7. At all times relevant herein, $K.G.^{3/}$ was a minor female individual residing in the State of California.
- 8. K.G. sought medical care from respondent for, inter alia, her history of abdominal pain and irregular menses.
- on or about March 30, 1989, respondent admitted K.G. to the hospital for a diagnostic laparoscopy concerning a possible ectopic pregnancy. Although he lacked sufficient training or supervision, he also attempted a laparoscopic appendectomy on K.G. He shredded the appendix and used the wrong instrument to remove it from the body, which caused spillage into the abdominal cavity. K.G. developed post-operative peritonitis and required a corrective laparotomy, during which her pelvis was determined to be severely

^{3.} The full name of this patient and of the other patients referenced in this Accusation are being withheld for the protection of the patients' privacy. The names of the patients will be provided by complainant through the administrative discovery process.

infected. K.G.'s appendix was determined to be normal, and she did not have an ectopic pregnancy.

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II. IN RE: "B.S." - APRIL 1989

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10. At all times relevant herein, B.S. was an adult female individual residing in the State of California.

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11. B.S. sought medical care from respondent for, inter alia, complications from a delivery of a stillborn fetus.

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12. On or about April 16, 1989, respondent admitted B.S. to the hospital with post-partum heavy bleeding. Respondent performed a D&C (dilation and curettage) procedure, during which he perforated her uterus. B.S. continued to bleed profusely. Instead of performing a laparoscopy at that time or determining reasons why he did not need to do so, respondent sought to control the bleeding with the insertion of a Foley catheter. B.S.'s bleeding abated temporarily but recurred shortly thereafter. Several hours later, respondent finally performed a laparoscopy, during which it was determined that the uterine perforation was bleeding. Respondent believed that the bleeding was from the placental site and proceeded to perform a laparotomy during which he repaired the uterus and ligated the hypogastric artery. Also during the laparotomy, respondent needlessly prolonged the operation by removing the appendix for suspected endometriosis.

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III. IN RE: "S.S." - SEPTEMBER 1990

- 13. At all times relevant herein, S.S. was an adult female individual residing in the State of California.
- 14. S.S. sought medical care from respondent for, inter alia, management of her pregnancy.
- 15. On or about September 27, 1990, respondent admitted S.S. to the hospital. S.S. had an apparently normal labor and spontaneous vaginal delivery, but then began to gush blood which indicated placental separation. Respondent achieved delivery of the placenta, but S.S.'s uterus inverted (a problem during a prior delivery by S.S.). Respondent surgically repaired the uterus, but S.S. experienced a marked loss of blood. Whereas her hemoglobin prior to delivery was 12.4 gms%, it was 3.7 gms% 18 hours after delivery and 3.8 gms% after another 24 hours. On the third postpartum day, respondent gave S.S. 2 units of blood. Her posttransfusion hemoglobin rose to 6.6 gms%.

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IV. IN RE: "E.G." - DECEMBER 1990

- 16. At all times relevant herein, E.G. was an adult female individual residing in the State of California.
- 17. E.G. sought medical care from respondent for, inter alia, a fibroid uterus.
- 18. On or about December 17, 1990, respondent admitted E.G. to the hospital for a total abdominal hysterectomy due to a uterine fibroid (18 week size). Respondent had only a resident (rather than another gynecologist) assisting him during the surgery. During the procedure, E.G. bled excessively. Respondent

finally called in another gynecologist, who in turn called a vascular surgeon for further assistance.

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V. IN RE: "L.W." - DECEMBER 1990

- 19. At all times relevant herein, L.W. was an adult female individual residing in the State of California.
- 20. L.W. sought medical care from respondent for, inter alia, management of her pregnancy.
- 21. L.W.'s baby was due on December 9, 1990. As of December 17, 1990, she had not yet delivered. Ultrasound examination revealed oligohydramnios, which places the fetus at risk for umbilical cord compression.
- 22. On or about December 18, 1990, respondent admitted L.W. to the hospital for induction of labor. Respondent induced labor over the next day and a half, during which the fetal heart rate tracing exhibited slightly decreased variability. cervical dilation was accomplished on December 18, 1990, and L.W. initiated pushing efforts to effect vaginal delivery. requested that the fetal and contraction monitoring equipment be Notwithstanding the fact that this was a high risk removed. pregnancy and that this stage of labor was the most likely to result in cord compression, respondent removed said equipment. The limp and needed assistance to initiate born infant was respirations.

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VI. IN RE: "R.C." - MARCH 1991

- 23. At all times relevant herein, R.C. was an adult female individual residing in the State of California.
- 24. R.C. sought medical care from respondent for, inter alia, her pregnancy.
- 25. On or about March 25, 1991, respondent admitted R.C. to the hospital as an outpatient for a pregnancy termination at approximately 14 weeks' gestation. During the termination procedure, respondent was not sure if he had removed the fetal skull. Instead of employing ultrasound analysis, respondent used instruments to attempt further uterine evacuation. Respondent perforated the uterus of R.C. and, using excessive force, pulled a portion of her sigmoid colon though the uterine perforation. The repair of this situation required a subsequent laparotomy and a diverting colostomy (which was reversed in or around July 1991).

VII. IN RE: "M.K." - JUNE 1991

- 26. At all times relevant herein, M.K. was an adult female individual residing in the State of California.
- 27. M.M. sought medical care from respondent for, inter alia, management of her pregnancy.
- 28. M.K.'s baby was due on June 15, 1991. As of June 27, 1991, she had not yet delivered.
- 29. On or about June 27, 1991, respondent admitted M.K. to the hospital for induction of labor. Respondent applied prostaglandin to ripen M.K.'s cervix notwithstanding the fact that she had undergone a Cesarean delivery during her prior pregnancy.

30. Respondent removed the fetal monitors for the patient's comfort, but fetal heart tracings revealed late heart rate decelerations and a flat baseline. Respondent obtained no fetal scalp samplings and did nothing to expedite delivery. The infant ultimately was born with low Appars and poor cord gasses.

VIII. IN RE: "T.M." - JULY 1991

- 31. At all times relevant herein, T.M. was an adult female individual residing in the State of California.
- 32. T.M. sought medical care from respondent for, inter alia, complications during her pregnancy.
- 33. On or about July 25, 1991, respondent admitted T.M. for marginal placental previa at 31 weeks' gestation.
- 34. On or about August 6, 1991, respondent performed a Cesarean section delivery on T.M.. Respondent then proceeded to go on vacation without designating a physician who would be responsible for the care of T.M. while she remained hospitalized and without writing special orders for T.M. during his absence. T.M. was not seen by a physician from August 7, 1991, until August 11, 1991, on which date T.M. complained that she had not been seen by a physician since her Cesarean section and demanded that a physician see her.

IX. IN RE: "M.M." - NOVEMBER 1991

- 35. At all times relevant herein, M.M. was an adult female individual residing in the State of California.
- 36. M.M. sought medical care from respondent for, inter alia, problems related to her pregnancy.
- M.M. to the hospital for induction of labor. Respondent applied prostaglandin twice to M.M. to ripen her cervix. M.M. responded to the treatment; by the next day, her cervix dilated to 3 cm and was 90% effaced. At that point, respondent applied a third dose of prostaglandin, which led to prolonged uterine contraction and prolonged deceleration of the fetal heart rate. Although initial resuscitative steps led to improvement of the fetal heart rate, there were several episodes of deceleration and fetal hypoxia over the next seven hours. Respondent did not attempt fetal scalp sampling. Respondent also did not attempt the use of vaginal lavage or tocolytic drugs to attempt reversal of the adverse uterine response to the third application of prostaglandin.
- 38. After full cervical dilation was achieved, M.M. was unable to effect vaginal delivery. Respondent twice attempted a mid-forceps rotations in labor room with a McClain (or other inappropriate type) forceps, without success. The fetal heart rate then decelerated continuously and was not responsive to resuscitative efforts. Respondent performed an emergency Cesarean section and delivered a depressed female infant.

CAUSES FOR LICENSE DISCIPLINE

- By virtue of the facts set forth above, respondent was grossly negligent in his diagnosis, care, and treatment of K.G., B.S., S.S., E.G., L.W., R.C., M.K., T.M., and/or M.M., jointly and severally. Gross negligence is unprofessional conduct under B&P § 2234(b). Such unprofessional conduct constitutes grounds to impose discipline upon respondent's Physician's and Surgeon's Certificate pursuant to B&P §§ 2220, 2234.
- 40. By virtue of the facts set forth above, respondent was repeatedly negligent in his diagnosis, care, and treatment of K.G., B.S., S.S., E.G., L.W., R.C., M.K., T.M., and/or M.M.. commission of repeated acts of negligence is unprofessional conduct under B&P § 2234(c). Such unprofessional conduct constitutes grounds to impose discipline upon respondent's Physician's and Surgeon's Certificate pursuant to B&P §§ 2220, 2234.
- 41. By virtue of the facts set forth above, respondent was incompetent in his diagnosis, care, and treatment of K.G., B.S., S.S., E.G., L.W., R.C., M.K., T.M., and/or M.M.. Incompetence is unprofessional conduct under B&P § 2234(d). Such unprofessional conduct constitutes grounds to impose discipline upon respondent's Physician's and Surgeon's Certificate pursuant to B&P §§ 2220, 2234.

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OTHER MATTERS

- B&P § 125.3 provides in pertinent part that: 42. 25
- "(a) Except as provided by law, in any order issued 26 in resolution of a disciplinary proceeding before any board 27

within the department ... the board may request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case. ...

2.0

"(c) A certified copy of the actual costs, or a good faith estimate of costs where actual costs are not available, signed by the entity bringing the proceeding or its designated representative shall be prima facie evidence of reasonable costs of investigation and prosecution of the case. The costs shall include the amount of investigative and enforcement costs up to the date of the hearing, including, but not limited to, charges imposed by the Attorney General.

"(d) The administrative law judge shall make a proposed finding of the amount of reasonable costs of investigation and prosecution of the case when requested pursuant to subdivision (a). The finding of the administrative law judge with regard to costs shall not be reviewable by the board to increase the cost award. The board may reduce or eliminate the cost award, or remand to the administrative law judge where the proposed decision fails to make a finding on costs requested pursuant to subdivision (a)...."

- 43. Section 16.01 of the 1996/1997 Budget Act of the State of California provides, in pertinent part, that:
 - "(a) No funds appropriated by this act may be expended to pay any Medi-Cal claim for any service performed by a physician while that physician's license is under suspension

or revocation due to disciplinary action of the Medical Board of California.

"(b) No funds appropriated by this act may be expended to pay any Medi-Cal claim for any surgical services or other invasive procedure performed on any Medi-Cal beneficiary by a physician if that physician has been placed on probation due to a disciplinary action of the Medical Board of California related to the performance of that specific service or procedure on any patient, except in any case where the board makes a determination during its disciplinary process that there exist compelling circumstances that warrant continued Medi-Cal reimbursement during the probationary period."

PRAYER

44. For the reasons set forth in paragraphs 1 through 43, inclusive, of this accusation, good cause exists to impose discipline upon the Physician's and Surgeon's Certificate issued to respondent.

WHEREFORE, the complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Division issue a decision:

- 1. Revoking or suspending Physician's and Surgeon's Certificate Number G-57582, heretofore issued to respondent Laurence D. Colman, M.D.;
- 2. Revoking, suspending or denying approval of the respondent's authority to supervise physician's assistants, pursuant to Business and Professions Code section 3527;

1	3. Ordering respondent, if placed on probation, to pay
2	the Division the costs of probation monitoring, pursuant to
3	Business and Professions Code section 2227;
4	4. Ordering respondent to pay the Division the actual
5	and reasonable costs of the investigation and enforcement of this
6	case;
7	5. Taking such other and further action as the Division
8	deems necessary and proper.
9	DATED: <u>April 15, 1997</u> .
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12	RON JOSEPH
13	Executive Director Medical Board of California
14	Department of Consumer Affairs State of California
15	Complainant
16	, Compression
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